Inspections Division

Date: 10/27/15

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	Portland
Street or Road	240 Lane Ave
Subdivision, Lot #	308 A005

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City PORTLAND Permit # 201501903

Date Permit Issued ___/___/___ Fee: $ _____ Double Fee Charged ☐

_____ L.P.I. # _____
Local Plumbing Inspector Signature

☐ Owner ☐ Town ☐ State

The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. This Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map # _____ Lot # _____

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Andreoli, Michelle ■ Owner ☐ Applicant
Mailing Address of Owner/Applicant	240 Lane Ave Portland, ME 04103
Daytime Tel. #	207-809-3972

OWNER OR APPLICANT STATEMENT
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

_____ Signature of Owner or Applicant _____ Date

CAUTION: INSPECTION REQUIRED
I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

_____ (1st) date approved

_____ Local Plumbing Inspector Signature _____ (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION
- ☐ 1. First Time System
- ■ 2. Replacement System
  - Type replaced: Trench
  - Year installed: c. 1960
- ☐ 3. Expanded System
  - ☐ a. <25% Expansion
  - ☐ b. >= 25% Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES
- ☐ 1. No Rule Variance
- ☐ 2. First Time System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector
- ■ 3. Replacement System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ■ b. State & Local Plumbing Inspector
- ☐ 4. Minimum Lot Size Variance
- ☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS
- ☐ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify: _____
- ☐ 4. Non-engineered Treatment Tank (only)
- ☐ 5. Holding Tank, _____ gallons
- ■ 6. Non-engineered Disposal Field (only)
- ☐ 7. Separated Laundry System
- ☐ 8. Complete Engineered System (2000 gpd or more)
- ☐ 9. Engineered Treatment Tank (only)
- ☐ 10. Engineered Disposal Field (only)
- ☐ 11. Pre-treatment, specify: _____
- ■ 12. Miscellaneous Components Pump Station

SIZE OF PROPERTY
12,300 ■ SQ. FT. ☐ ACRES

SHORELAND ZONING
☐ Yes ■ No

DISPOSAL SYSTEM TO SERVE
- ■ 1. Single Family Dwelling Unit, No. of Bedrooms: 2
- ☐ 2. Multiple Family Dwelling, No. of Units: _____
- ☐ 3. Other: _____ (specify)

Current Use ☐ Seasonal ■ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY
☐ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private
■ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
- ☐ 1. Concrete
  - ☐ a. Regular
  - ☐ b. Low Profile
- ■ 2. Plastic
- ☐ 3. Other: Existing

CAPACITY: 750 GAL

DISPOSAL FIELD TYPE & SIZE
- ■ 1. Stone Bed ☐ 2. Stone Trench
- ☐ 3. Proprietary Device
  - ☐ a. cluster array ☐ c. Linear
  - ☐ b. regular load ☐ d. H-20 load
- ☐ 4. Other: _____

SIZE: 600 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
■ 1. No ☐ 2. Yes ☐ 3. Maybe

If Yes or Maybe, specify one below:
- ☐ a. multi-compartment tank
- ☐ b. ___ tanks in series
- ☐ c. increase in tank capacity
- ☐ d. Filter on Tank Outlet

DESIGN FLOW
180 gallons per day

BASED ON:
- ■ 1. Table 4A (dwelling unit(s))
- ☐ 2. Table 4C (other facilities)

SHOW CALCULATIONS
— for other facilities —

- ☐ 3. Section 4G (meter readings)

ATTACH WATER METER DATA

SOIL DATA
PROFILE 9 CONDITION E

at Observation Hole # TP-1

Depth 2" "

of Most Limiting Soil Factor
Groundwater

DISPOSAL FIELD SIZING
- ☐ 1. Medium—2.6 sq. ft. / gpd
- ■ 2. Medium—Large 3.3 sq. f.t / gpd
- ☐ 3. Large—4.1 sq. ft. / gpd
- ☐ 4. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP
- ☐ 1. Not Required
- ☐ 2. May Be Required
- ■ 3. Required

Specify only for engineered systems:

DOSE: _____ gallons

LATITUDE AND LONGITUDE
at center of disposal area

Lat. N43 d 41 m 30.5 s
Lon. W70 d 19 m 6.7 s
if g.p.s. state margin of error: 20'

SITE EVALUATOR STATEMENT

I certify that on July 2, 2015 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

[signature]	387	07/07/15
Site Evaluator Signature	SE #	Date
Stephen B. Marcotte	(207) 795-6009	smarcotte@ces-maine.com
Site Evaluator Name Printed	Telephone Number	Email Address

Designed with SeptiCAD v3

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.